

# IKF FIGHTER REGISTRATION

IKF STAFF USE ONLY

**IF AVAILABLE:** Please include **WITH** this application a DVD or Video Tape (VHS-USA STYLE ONLY) of 1-3 of your most recent fight(s). Indicate date, place, opponent & result on cover.  
A registration without proof of fighting ability could be given an "X" Ranking.  
To register as an **IKF** fighter,  
Print out the form below & **MAIL** to the **IKF** & your "**1 TIME**" fee as indicated below  
**Please Add an additional \$10 Per Additional Rule Style Listing.**

- SENT: \_\_\_/\_\_\_/\_\_\_
- REC: \_\_\_/\_\_\_/\_\_\_
- PAID: \$ \_\_\_\_\_
- PHOTO: \_\_\_\_\_

## PLEASE PRINT NEATLY

If we cannot read your printing, the WRONG info will be listed and no promoters will be able to contact you for fights.

1. **Full Name:** \_\_\_\_\_
2. Fight Weight in **Pounds:** \_\_\_\_\_ Lbs. - Height in **Feet & Inches:** \_\_\_' \_\_\_"
3. Current **Age:** \_\_\_\_\_ & Birthday (month, day & year): \_\_\_/\_\_\_/\_\_\_
4. P.O. Box Or Physical Street Number: \_\_\_\_\_
5. City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip Code/PC: \_\_\_\_\_
6. Country: \_\_\_\_\_
7. Trainers Name: (*List SELF if you train yourself*) \_\_\_\_\_
8. Contact Phone Number to be listed in Rankings: \_\_\_\_\_
9. E-Mail (If One): \_\_\_\_\_
10. **Amateur** Fight record with KOs if any – **If none, please put –0- on line:**
  - Amateur Muay Thai or Kickboxing \_\_\_\_\_ Wins \_\_\_\_\_ Loses \_\_\_\_\_ Draws \_\_\_\_\_ KO's/TKO'S
  - Amateur Mixed Martial Arts \_\_\_\_\_ Wins \_\_\_\_\_ Loses \_\_\_\_\_ Draws \_\_\_\_\_ KO's/TKO'S
  - Amateur Boxing \_\_\_\_\_ Wins \_\_\_\_\_ Loses \_\_\_\_\_ Draws \_\_\_\_\_ KO's/TKO'S
11. **Profession** Fight record If a PRO – **If none, please put –0- on line:**
  - Pro Kickboxing \_\_\_\_\_ Wins \_\_\_\_\_ Loses \_\_\_\_\_ Draws \_\_\_\_\_ KO's/TKO'S
  - Pro Mixed Martial Arts \_\_\_\_\_ Wins \_\_\_\_\_ Loses \_\_\_\_\_ Draws \_\_\_\_\_ KO's/TKO'S
  - Pro Boxing \_\_\_\_\_ Wins \_\_\_\_\_ Loses \_\_\_\_\_ Draws \_\_\_\_\_ KO's/TKO'S
12. **RULE DIVISION:** The \$25 covers your listing in "1" Rule Division. Please Add an additional **\$10 Per Additional Listing** past 1 if you want to be in more than 1 ranking division. PLEASE "CHECK" the Appropriate Rule Style(s) you wish to be ranked in:  
\_\_\_ **Full Contact Rules** - \_\_\_ **International Rules-** \_\_\_ **Muay Thai Rules** - \_\_\_ **San Shou Rules**
13. Last Bout Information: **If possible or if any:**
  - Opponents Name: \_\_\_\_\_
  - Where was Bout/Event: \_\_\_\_\_ Date of Bout/Event: \_\_\_/\_\_\_/\_\_\_
  - Result (Win or Lose and how: Decision: unanimous, split, majority, TKO, KO, Draw, etc): \_\_\_\_\_
14. Other Organization, rank and title(s) **IF ANY:** \_\_\_\_\_

I certify the above Is true and I confirm so by my signature: \_\_\_\_\_, Date: \_\_\_/\_\_\_/\_\_\_

**Please send all required information and fees to:**  
**IKF / Attn: RANKINGS DEPT. P.O. Box 1205, Newcastle, CA, 95658, USA - Or**  
**IKF / Attn: RANKINGS DEPT. 9250 Cypress Street, Newcastle, California, 95658, USA**  
**REGISTRATION FORMS WITHOUT FEES WILL BE DISPOSED OF.**



[www.IKFKickboxing.com](http://www.IKFKickboxing.com) - [www.IKFMuayThai.com](http://www.IKFMuayThai.com)